



IDAHO REAL ESTATE COMMISSION

633 North 4th Street
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Boise, ID 83720-0077
(208) 334-3285

Telecommunications Relay Service 1 800 377-3529

REE-010-16

Rev. 7/07

Commission Use Only

Date Filed: _____

Receipt: _____

NOTICE OF REAL ESTATE LICENSE CHANGE

Changes shall become effective when all forms and fees are received and approved by the Idaho Real Estate Commission (IREC).
Forms that are illegible, incomplete or not accompanied by the proper attachments will be returned.

SEE REVERSE SIDE FOR IMPORTANT ADDITIONAL INSTRUCTIONS

Name of Licensee for Whom
the Change is Requested: _____

(As it appears on license) _____ last name _____ first name _____ middle name or initial _____ license number of licensee _____

I certify that the information provided is true and correct and that, if maintaining an active license, I have obtained Errors and Omissions Insurance as required by Idaho Law.

Errors & Omission Insurance Carrier: _____ Policy number (if known): _____ Expiration date: _____

Signature of Licensee _____

	CHANGE FROM: Complete only those items that will be changing	CHANGE TO: Complete only those items that will be changing. (See additional information on reverse side)
A	License Type: <input type="checkbox"/> Sales Associate Status: <input type="checkbox"/> Active <input type="checkbox"/> Broker <input type="checkbox"/> Inactive <input type="checkbox"/> Associate Broker <input type="checkbox"/> Provisional <input type="checkbox"/> Designated Broker <input type="checkbox"/> Other <input type="checkbox"/> Branch Manager	License Type: <input type="checkbox"/> Sales Associate Status: <input type="checkbox"/> Active <input type="checkbox"/> Broker <input type="checkbox"/> Inactive <input type="checkbox"/> Associate Broker <input type="checkbox"/> Provisional <input type="checkbox"/> Designated Broker <input type="checkbox"/> Other <input type="checkbox"/> Branch Manager
B	<input type="checkbox"/> Main Office <input type="checkbox"/> Branch Office Firm Name: _____ Location Address: _____ Mailing Address: _____ City, State, Zip: _____ Office Telephone (with area code): _____ _____ Terminating Designated Broker=s Signature	<input type="checkbox"/> Main Office <input type="checkbox"/> Branch Office Firm Name: _____ Location Address: _____ Mailing Address: _____ City, State, Zip: _____ Office Telephone (with area code): _____ _____ New Designated Broker=s Signature I do want a printed optional license certificate. (\$15 for each certificate) <input type="checkbox"/> YES <input type="checkbox"/> NO
C	Licensee=s Name: _____ Personal Address: _____ City, State, Zip: _____ Home Telephone (with area code): _____ Cell Phone: _____ Email: _____	Licensee=s Name: _____ Personal Address: _____ City, State, Zip: _____ Home Telephone (with area code): _____ Cell Phone: _____ Email: _____
D	Firm Organization: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company	Firm Organization: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company
E	License Origin: <input type="checkbox"/> Idaho Primary License <input type="checkbox"/> Reciprocity	License Origin: <input type="checkbox"/> Idaho Primary License <input type="checkbox"/> Reciprocity

See reverse side for important additional instructions

Change	Blocks To Complete On Reverse Side	Fee	Documentation and/or Other Information Needed To Complete the Requested Change
Active status to inactive status (A to I)	A, B and C	None	(If you are the designated broker, then you must provide the location of the firm=s records. They must be available for inspection for a period of three years following the year in which the transaction was closed. Also, all licensees who are currently licensed with you must be re-licensed with another designated broker or else be inactivated.) Location of Files: _____
Changing from inactive or suspended to active (I to A) or (S to A)	A and B	\$0 unless a license is requested then \$15.	I certify that I have completed the Continuing Education requirements under section 54-2023 and I further understand that penalties may be imposed under sections 54-2059 and 54-2060, Idaho Code, for the use of fraud, deception, misrepresentation, misstatement or any unlawful means in applying for or securing a real estate license. I agree to furnish satisfactory proof as required by section 2018, Idaho Code , of having completed the Continuing Education requirements upon request by the Commission. I also affirm that I have not engaged in real estate practice while my license was inactive or suspended. <input type="checkbox"/> No <input type="checkbox"/> Yes
Salesperson to broker	Use an "Idaho Real Estate License Application" instead of this form. Must have completed the BCOO or Idaho Brokerage Management course within the past 5 years.		
Associate broker to designated broker	A and any sections that might also be applicable.	\$0 unless a license is requested then \$15 for each license affected by change.	§ If opening a new firm, attach the appropriate application, i.e. LLC, corporation, partnership, etc. (Forms can be obtained at IREC or printed from the website.) § If becoming the designated broker for an existing firm, attach a list of affected persons, and minutes showing the broker change. All persons licensed at the firm must also change their licenses or be placed on inactive status. A new designated broker must have completed the BCOO or the Idaho Brokerage Management course within the past 5 years.
Designated broker to any type of non-designated broker	A and any sections that might also be applicable.	\$0 unless a license is requested then \$15 for each license affected by change.	Designated brokers must provide the location of the firm=s records upon closing that firm. Complete the section Active status to Inactive status above. All persons licensed at the firm must also change their licenses.
Change of firm name and/or address.	B and any sections that might also be applicable.	\$0 unless licenses are requested then \$15 for each license affected by change.	All licenses with the old firm name or address, including any licensed branch offices, must also be changed. If changing the legal organization of the firm, i.e. sole proprietorship to corporation, attach the appropriate firm application. (Forms can be obtained from the IREC or printed from the website.)
Licensee changing to another offices	B	\$0 unless a license is requested then \$15.	When changing offices, you should verify your E&O coverage. If covered by the former office's firm policy, you will need to obtain new coverage.
Licensee=s name	C	\$0 unless a license is requested then \$15.	Attach legal documentation of the requested name change i.e. marriage certificate, divorce decree, legal name change form.
Change of home address	C	None	None
Change of the legal organization of the firm	D	\$0 unless a license is requested then \$15.	Attach the appropriate application for the type of legal organization of the firm. Application forms are available from the IREC upon request and are available for printing from the website. Sole proprietorships do NOT require a separate application form.
Reciprocal to Idaho primary or Idaho primary to reciprocal	E and any sections that might also be applicable.	\$0 unless a license is requested then \$15.	Attachments are dependent on reciprocal agreement. Please contact the Commission office.

NOTICE: Because of rising costs associated with issuing a refund, it is the policy of the Idaho Real Estate Commission (IREC) to refund overpayments of under \$25 only if requested in writing within 30 days of IREC receipt of the overpayment. Overpayments of \$25 or more will be automatically refunded to the licensee. There will be a \$20 fee assessed for each check returned to the Idaho Real Estate Commission for insufficient funds.